

# Addressing Vaccine Hesitancy in Conflict Zones

## IPA Vaccine Trust Project

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#IPATrustsVaccines

# Outline

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- Vaccine Hesitancy in Conflict Zones
- Determinants of Vaccine Confidence
- IPA Vaccine Trust Project
- Masters Trainer Program



# VACCINE HESITANCY IN CONFLICT ZONES



**Conflict Zones and Vaccination hesitancy** are one of 10 threats to global health in 2019.<sup>WHO</sup>

19.4 million infants worldwide were not reached with routine immunization services.

Of the 19.4 million infants who are not fully vaccinated with DTPcv-3, 8.6 million (44%) live in 16 countries that are polio-endemic, fragile or affected by conflict.

- Pakistan is 1 of the 16 countries
- Pakistan suspended polio vaccine drive after health worker attacks.
- 3 polio workers killed in April
- 1000s of parents have refused to allow their children to be inoculated.

# DETERMINANTS OF VACCINE CONFIDENCE

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vaccine acceptance is the desired end outcome, vaccine confidence is an important antecedent  
vaccine confidence refers to the trust that parents or health-care providers have! <sup>1</sup>

Trust

Attitude and Beliefs

Health-care provider  
confidence both in vaccines  
and in their ability to  
communicate effectively to  
parents about vaccines

Information  
environment regarding  
vaccines

# TRUST IS THE BEDROCK OF VACCINE ACCEPTANCE

How can we increase trust in Vaccines<sup>2</sup>? India Polio experience



**SA** **Scientific American** @sciam · Apr 15  
Opinion: Five years ago this week India and the entire South-East Asia region were certified polio-free, an unparalleled achievement in human health and the result of building trust within communities.



**How Can We Increase Trust in Vaccines?**  
A look at India's experience could provide an answer  
[blogs.scientificamerican.com](https://blogs.scientificamerican.com)

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People's decisions to vaccinate are grounded in general feelings of trust. Trust in the vaccines, healthcare professionals and the government<sup>1</sup>.

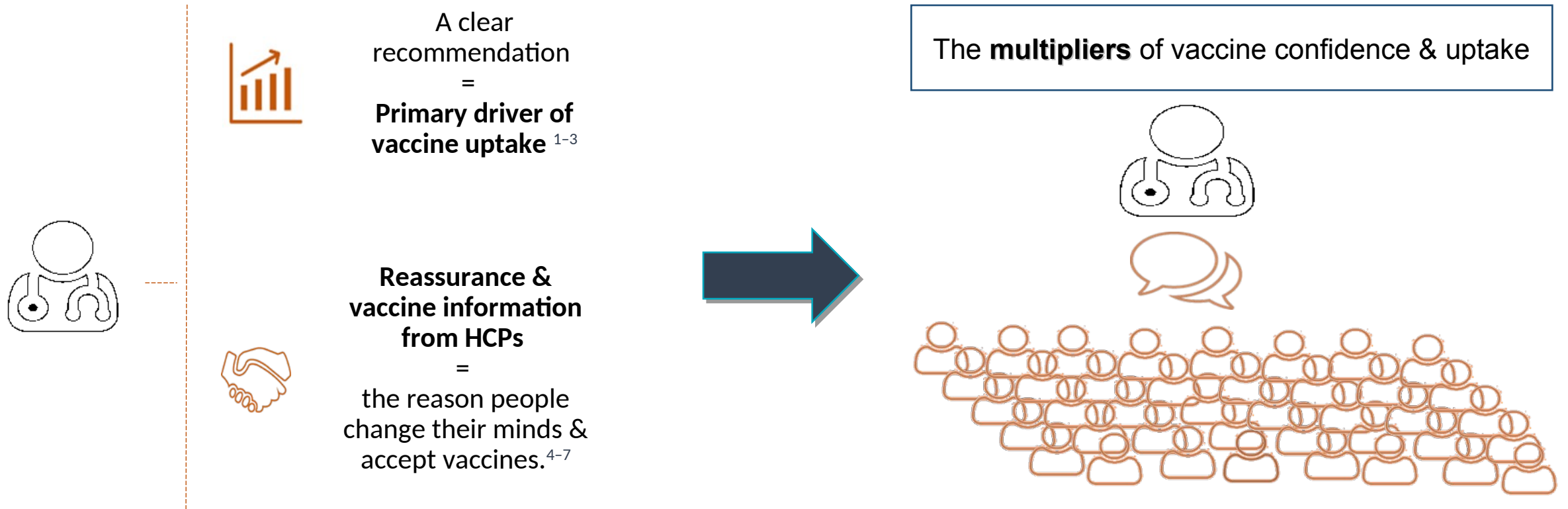
# VACCINE CONFIDENCE CANNOT BE INCREASED BY FACTS & EDUCATION ALONE

- Parents want the facts about vaccination<sup>1</sup> **BUT** information and education alone do not change beliefs or behavior among the public and may even **backfire**.<sup>2</sup>
- This is known as the **know-do gap**



# CRITICAL ROLE OF HEALTHCARE PROFESSIONALS

Healthcare Professionals are the **trusted** gatekeepers to vaccination<sup>1-3</sup>



1. Freed GL, et al. Pediatrics 2011; 127:S107–S112. 2. McCauley MM, et al. Acad Pediatr 2012; 12:375–383. 3. Kundi M, et al. Curr Drug Saf 2015; 10:16–22. 4. Gust DA, et al. Semin Pediatr Infect Dis 2003; 14:207–12. 5. Wheelock A, et al. 7th European Public Health Conference 2014. 6. Marlow LA, et al. Vaccine 2007; 25:1945–52. 7. Salmon DA, et al. Vaccine 2015; 33:Suppl 4:D66–71. Courtesy: Angus Thomson

# EUROBAROMETER STUDY ON EUROPEANS' ATTITUDES TOWARDS VACCINATION 2019

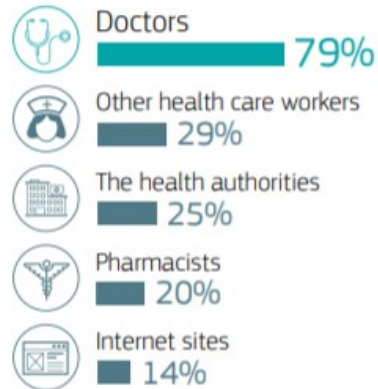


Europeans' attitudes & behaviours about **vaccination**



A large majority of europeans **trust doctors** regarding information on **vaccination**

ALMOST **80%** WOULD **CONSULT A DOCTOR** FOR INFORMATION ON VACCINATION



FOR INFORMATION ON VACCINATION

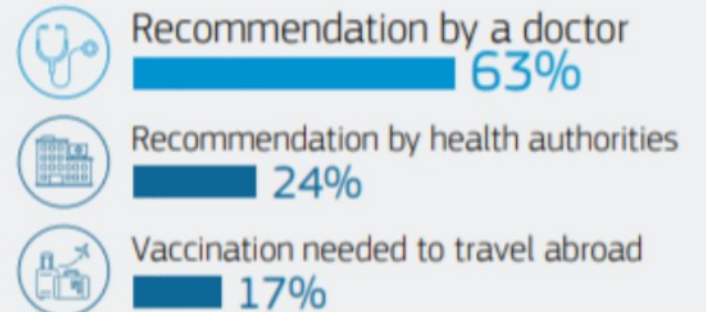


ONLINE SOCIAL NETWORK **1%**



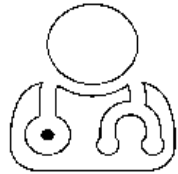
Nearly **two thirds** of those **who had** a vaccination in the last 5 years **did so because it was recommended by a doctor**

TOP 3 REASONS



# BUT IT IS NOT ALWAYS EASY

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However, HCPS may:

- Underestimate their influence<sup>1</sup>
- Have low perceived/actual self-efficacy to influence a decision<sup>1</sup>
- Have decreased time to discuss vaccination
- Use prescriptive, factual language to address enquiries,<sup>2</sup> which may have limited effectiveness in changing behavior<sup>2,3</sup> [know-do gap]

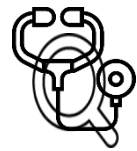
**Trust in the source of information may be more important than what is in the information<sup>4</sup>**

# COMMUNICATION IS A HEALTH INTERVENTION

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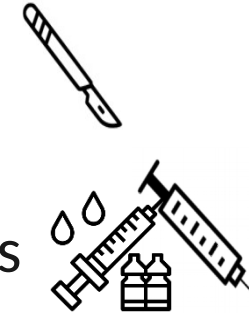
medication



diagnostics



surgery



vaccines



Communication

Can change behavior

Is bioactive

What we say to our patients matters, but **HOW** we say it matters even more<sup>1-2</sup>

1. <http://blogs.bmj.com/bmj/2017/05/18/abraar-karan-what-we-say-to-our-patients-matters-but-how-we-say-it-matters-more/>.

2. Parrish-Sprowl J. 2018. Vaccine hesitancy communication: what counts as evidence. *Vaccine*. 36(44):6529–6530.

# ENABLING HCPS TO IMPROVE VACCINE CONFIDENCE

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- You are a trusted source of vaccine information
- Your recommendation is a powerful predictor of vaccination



You are the  
cornerstone of  
public acceptance of  
vaccination

You need to know  
this, be valued for  
this and be  
equipped to help  
people make  
healthy decisions  
such as vaccinating

IPA Master Trainer  
Program  
***a practical guide  
aims to facilitate  
this***

# IPA VACCINE TRUST PROJECT

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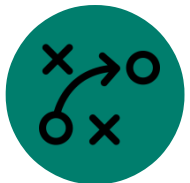
Fostering resilient public trust in vaccination

## Aims



- Equip & Galvanize **health professionals** to advocate vaccination
- Create **resilient** public health communications ecosystems

## Objectives



- To **engage and empower pediatricians** by improving the effectiveness of their conversations with parents on vaccination leading to increased trust, positive intent to vaccinate and healthy preventative behaviors.

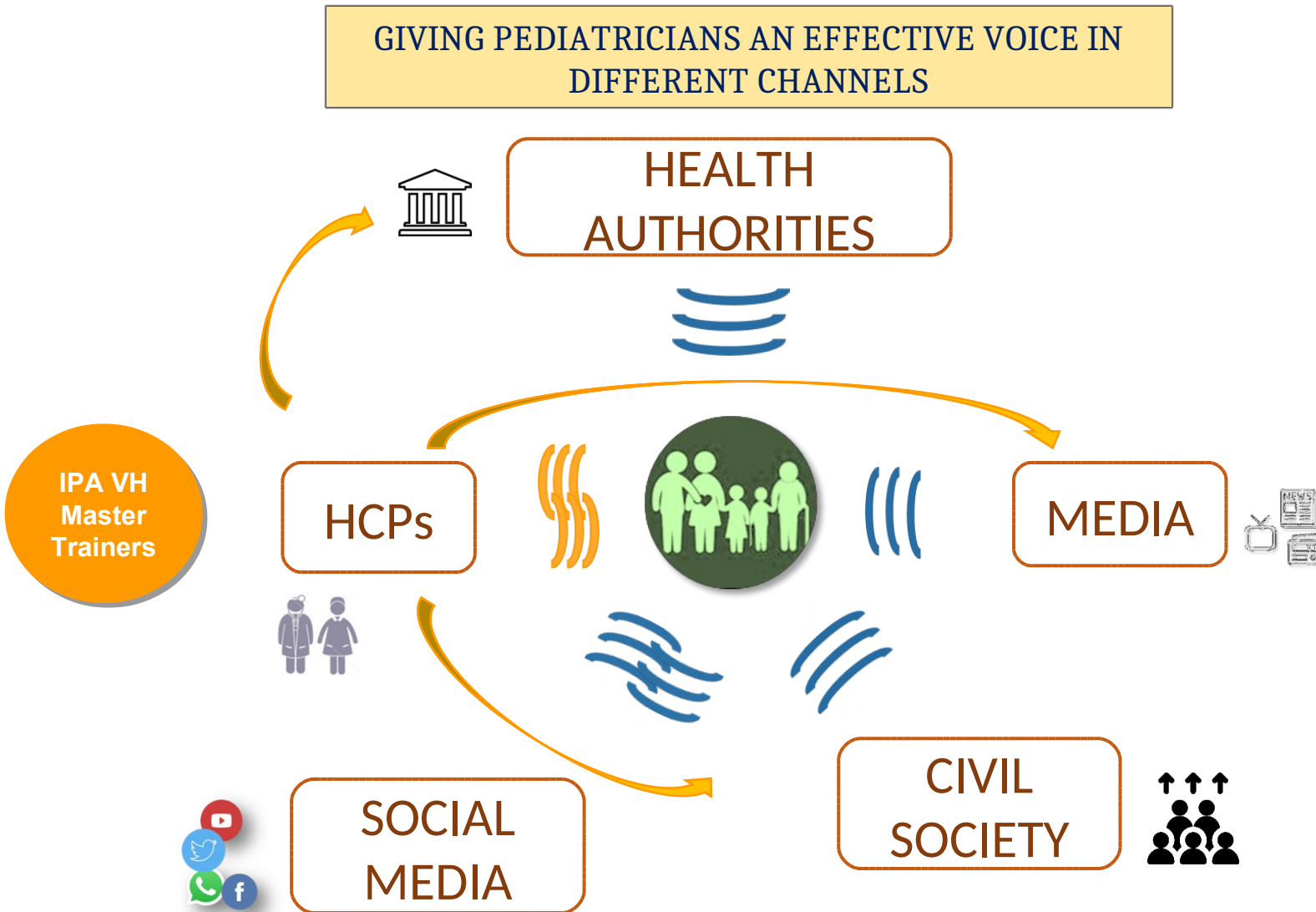
# Cont.

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- To provide **leadership and policy advice to national pediatric societies** so that they can build nationwide Value of Vaccination (VoV) messaging to the public, media, politicians and decision makers and support the pediatricians in their efforts in vaccine advocacy.
- To train pediatricians to become influencers in the community and social media so that they are recognized as the **go-to experts on vaccination** thus enhancing community ownership of positive vaccination practices and are able to execute counter measures to negative propaganda by virtue of being advocates of child health.
- Build a community of practice, share knowledge, best practices – **Global Leadership Forum**
- Document, analyze and share impact of pediatric advocacy, effects of enhanced communication techniques and influence of counter measures

# VACCINE TRUST MASTER TRAINER PROGRAM

GIVING PEDIATRICIANS AN EFFECTIVE VOICE IN DIFFERENT CHANNELS



Regional Training of Trainers (ToTs) in 7 IPA regions, roll out and scale up in multiple countries



# VACCINE TRUST MASTER TRAINER PROGRAM

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## Content

**5** training modules

### Behavioral Science

To help health care providers understand evidence-based principles of behavioral science behind vaccine hesitancy

### Interpersonal Communication

Support and train frontline healthcare workers in the Global Interpersonal Communication on Immunization (IPC- I) package.

### Building Vaccine Value

To support prevention strategies and build trust and awareness in the value of vaccines

### Social Media

Train HCPs become influencers in the social media conversation on vaccines.

### Main Stream Media

Prepare HCPs to become media go-to experts on vaccination.

# IPC/I INITIATIVE BY UNICEF - PROPOSED IPA COLLABORATION

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- Global Advisory Group – Nine global partners including GAVI, CDC, WHO, JSI, Manoff, Emory University, Bullcity Learning & IPA.
- IPA endorsing the package
- Advocacy for need of package
- Helping in regional Training of Trainers by providing Master trainers
- IPA can coordinate to develop M & E indicators globally
- Member societies can promote and help coordinate in tweaking IPC along with local governments and ensure that timelines are maintained

# SOCIAL MEDIA ENGAGEMENT MODULE

*HCPs to become influencers in the social media conversation on vaccines*

## Social Media 101

- Understanding social media
- Getting started
- Tips & Tricks
- Becoming an influencer

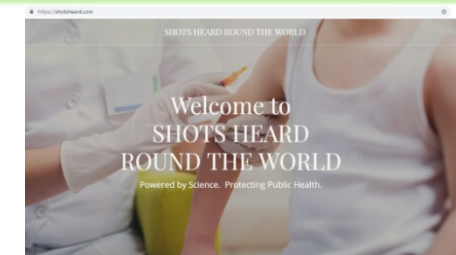
## Vaccines Disinformation Narrative

- Facilitates tailored presentation on vaccine disinformation that tiggers listener to question :
- How disinformation spreads & gets traction
  - the motivation of those who produce misinformation
  - 6 illustrative case studies

## Social Media Advanced

### Social Media Strategy Guide and Anti-Vaccine Combat Toolkit:

- Developed by Dr. Todd Wolyn & colleagues at Kids Plus Pediatrics after they had a huge denial-of-service attack
- “Shots Heard” Round the World: **social media rescue network** to aid HCPs experiencing a large-scale anti-vaccine social media attack.



# MAIN STREAM MEDIA ENGAGEMENT

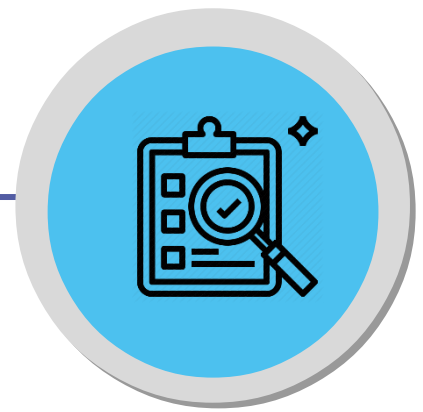
*HCPs to interact with media and deal with vocal vaccine deniers*



- Understanding the Media
- Developing key messages
- General interview tips
- Engaging during crisis
- Writing a press release
- Writing blogs and op-eds



# MONITORING & EVALUATION PLAN



## **Output Indicators**

- Knowledge Evaluation
- Value Perception
- Workplace Output
- Social Media Output
- Social Media Interaction

## **3-step process**

Pre-training Evaluation

Post-training Session

Post Use Session

## **Methodology**

- Sample Surveys
- Self-assessments
- Client exit interviews
- Qualitative Interviews
- Social Media Hashtags
- Media Articles



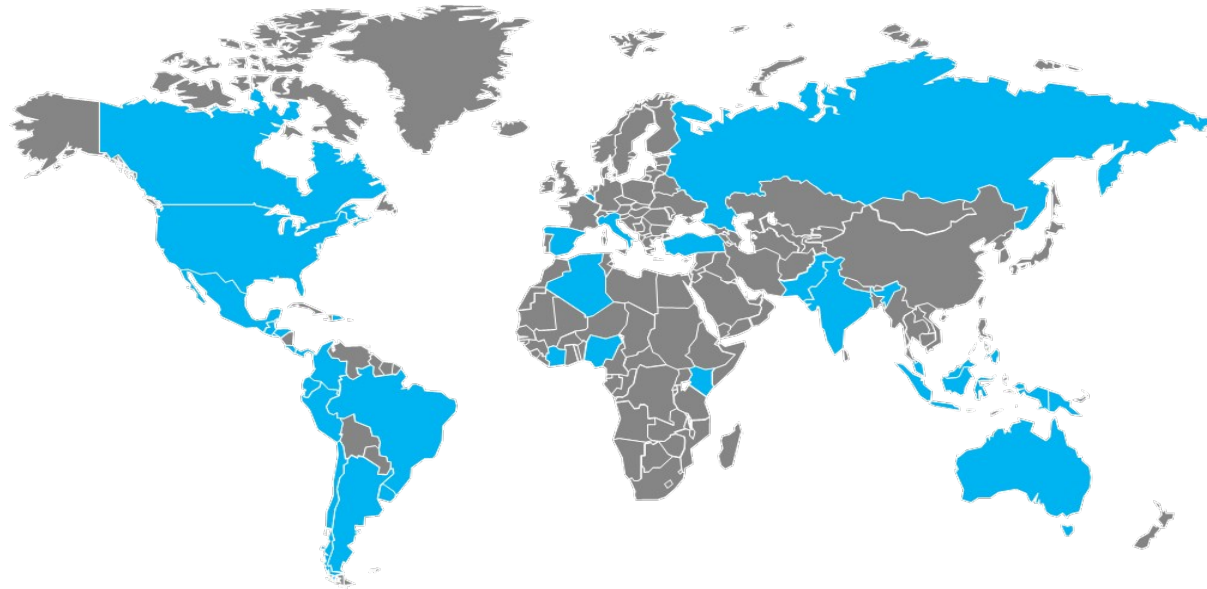
# PILOT MASTER TRAINER WORKSHOPS

93% of participants felt empowered to proactively talk about vaccination with their patients.  
>80% participants believed the acquired skills will help their daily practice

Pilot 2 - Panama City.  
March 2019

No. of trainees: 49

62 participants  
20 countries



Pilot 1 - Delhi, India.  
December 2018

No. of trainees: 58

83 participants  
18 countries



# GLOBAL LEADERSHIP FORUM



*Building a community of practice, share knowledge, best practices*

- ✓ Advise on local challenges and identify potential strategies
- ✓ Engaging with local stakeholders
- ✓ Sharing knowledge on issues
- ✓ Serving as influencers to build trust
- ✓ Execute counter measures
- ✓ Provide leadership and policy advice



# Addressing VH in Conflict Zones

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- ✓ IPA to prioritize and roll out project in conflict zones
- ✓ Support IPC/I for Frontline Health Workers in conflict zones
- ✓ To offer customize package if needed



# Thank you



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